

# STATE OF NEW HAMPSHIRE

### 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Robert	Clegg, Debra Va	nderbeek, Perikli	Karoutas, Leann Mo	ccia
II. Name of lobbyist's partners	ship, firm or corp	oration, if any:		
Legislative Sol	utions, L.L.C.			
(Name of partne	rship, firm or corpo	ration)		
P.O. Box 107	724	Bedford	NH	03110
Business Address: (Street)	(	Town/City)	(State)	(Zip Code)
( ) 603-986-9145	( )		<sub>e-mail</sub> dbeek@a	ol.com
( ) <u>603-986-9145</u> (Telephone)		(Fax)		
III. This statement covers: (Chreportable expense transaction				ay file a separate report for
☐ All reportable transactions o	ccurring in the mo	nths prior to the rep	orting date relative to the	ne following client:
The All	iance for Solar C	hoice		
	ne of Client as it app	pears on the Lobbyist	Registration Form)	<del></del>
<u>OR</u>				
All reportable transactions by unrelated to any particular client		uding the lobbyist's	family), or the lobbying	g firm listed below which are
IV. Date of Report April 20	5, 2017		July 26, 2017	
Reports cover: activity from da	te of registration to	3/31/17 acti	vity from 4/1/17 to 6/30/17	7
	r 25, 2017 [ ]		January 31, 2018 X	/// 7
activity fro	m 7/1/17 to 9/30/17	acti	vity from 10/1/17 to 12/31	/1/
V. There have been no fees of this box is checked, complete j Concord, NH 03301.		•		•
VI. Check if additional reports				
X If you have received fees or				
☐ If you have paid an honorari Expense Reimbursement	um or reimbursed	expenses, you mus	t file <b>Addendum B</b> – Re	port of Honorariums or
If you, your firm, or your far	mily has made pol	itical contributions.	you must file Addendu	ım C– Political Contributions
Sworn Statement/Affirmation	hy Labhyist			
I have read RSA 15, RSA 15-B, and complete to the best of my k	RSA 14-C and RS	SA 664 and hereby sief.	swear or affirm that the	foregoing information is true
Mart lley			January 15, 2018	
(Signature of lobbyist)		<del></del>	(Da	
Robert Clegg		_		RECEIVED
(Print Name of lobbyist)				JAN 17 2018
				NEW HAMPSHIRE DEPARTMENT OF STATE

# PLEASE PRINT

## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Robert Clegg, Debra Vanderbeek, Periklis Karout	as, Lealiii Moccia
II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C. (Name of partnership, firm or corporation)	<del></del>
III. Name of Client The Alliance for Solar Choice	Date January 15, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 9000.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 27,000.00 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>36,000.00</u>
<ul> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$ 0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid expenses; (b) the aggregate total of all the: meals purchased during a busines as than \$10 that is given to the person and with a value of \$25.00 or less); and printing period of greater than \$25.00 for the of greater than \$25, purchase of the results of the person
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 9000.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 9000.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 27,000.00
f) Total of all expenses year to date	f) \$ 36,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
My 1 ( left	January 15, 2018
(Signature of lobbyist)	(Date)
Robert Clegg	
(Print Name of lobbyist)	

# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying par	tnership, firm, or corpo	oration: Legislative So	olutions
Name of Client (leave particular client):	blank if Statement is fo	or the partnership, firm, or	corporation and not related to any
Date of Report (check	one):		
April 26, 2017 □	July 26, 2017 🗆	October 25, 2017 🗆	January 31, 2018 💢
			nd Expenses described above, and umber of Addendum forms being
Addendum A(	s).		
Addendum B(	s).		
Addendum C(	3).		
complete to the best of	m that the foregoing in my knowledge and be	lief.	nt and each Addendum is true and
(Signature of lobbyist)			(Date)
Debra Vanderbeek			
(Print Name of lobbyis	et)		

# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Statement/Affirmation by Lobby	ist
Statem	ent of Income and Expenses for:	

Name of Lobbying partnership, firm, or corporation:	gislative Solutions
Name of Client (leave blank if Statement is for the partnershiparticular client):	•
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □ October 25, 2	2017 □ January 31, 2018 💆
I have read RSA 15, RSA 15-B, RSA 664, the Statement of the following Addendums submitted with that Statement (ir submitted):	•
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information on the complete to the best of my knowledge and belief.	
	January 15, 2018
(Signature of lobbyist)	(Date)
Periklis Karoutas  (Print Name of Jobbyist)	

# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Leann Moccia

(Print Name of lobbyist)

	Affirmation by Lobby ne and Expenses for:			
Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative S	olutions	
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not relat	ted to any
particular client):		· · · · · · · · · · · · · · · · · · ·		
Date of Report (check	cone):			
April 26, 2017 □	July 26, 2017 □	October 25, 2017 □	January 31, 2018	
		he Statement of Income at at Statement (insert the n		
Addendum A	s).			
/ Addendum B(				
Addendum Co	s).			
	rm that the foregoing in f my knowledge and be	nformation on the Stateme lief.	nt and each Addendum is	s true and
Hann 1	Vallera .	Janu	ary 15, 2018	_
(Signature of lobbyist	)		(Date)	_